

Application Data Sheet

Application Information

Application number::
Filing Date:: 02/23/04
Application Type:: Continuation
Subject Matter:: Utility
Title:: DEPLOYMENT ACTUATION SYSTEM FOR
INTRAFALLOPIAN CONTRACEPTION

Attorney Docket Number:: 016355-003920US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 1B
Total Drawing Sheets:: 27
Small Entity?: Yes
Petition included?: No
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: CHRISTIAN
Family Name:: LOWE
City of Residence:: San Francisco
State or Province of Residence:: CA
Street of Mailing Address:: 161 Broderick Street, #1
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94117

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: DON
Family Name:: GURSKIS
City of Residence:: Redwood City
State or Province of Residence:: CA
Street of Mailing Address:: 75 Duane Street, #4
City of Mailing Address:: Redwood City
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94062

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: ASHISH
Family Name:: KHERA
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 236 Prospect Avenue
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94110

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: MONICA
Family Name:: BARNHART
City of Residence:: Foster City
State or Province of Residence:: CA
Street of Mailing Address:: 1057 Shell Blvd. #1
City of Mailing Address:: Foster City
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94404

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: STEVEN
Family Name:: BACICH
City of Residence:: Half Moon Bay
State or Province of Residence:: CA
Street of Mailing Address:: 20 Fairway Place
City of Mailing Address:: Half Moon Bay
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94019

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: BETSY
Family Name:: SWANN
City of Residence:: Newark
State or Province of Residence:: CA
Street of Mailing Address:: 8161 Tan Foran Court
City of Mailing Address:: Newark
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94560

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: ROBERTO
Family Name:: SILVA-TORRES
City of Residence:: Foster City
State or Province of Residence:: CA
Street of Mailing Address:: 840 Sea Spray Lane, #110
City of Mailing Address:: Foster City
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94404

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/644,287	08/22/00
09/644,287	An Appn claiming	60/150,238	09/23/99
	benefit under 35 USC		
	119(e) of		

Assignee Information

Assignee Name::	CONCEPTUS, INC.
Street of mailing address::	1021 Howard Avenue
City of mailing address::	San Carlos
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94070